



LOSS PREVENTION SERVICE REQUEST

USER MANUAL

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MODULE 1 — ACCESSING LOSS PREVENTION SERVICE REQUESTS

After this module, you will be able to:

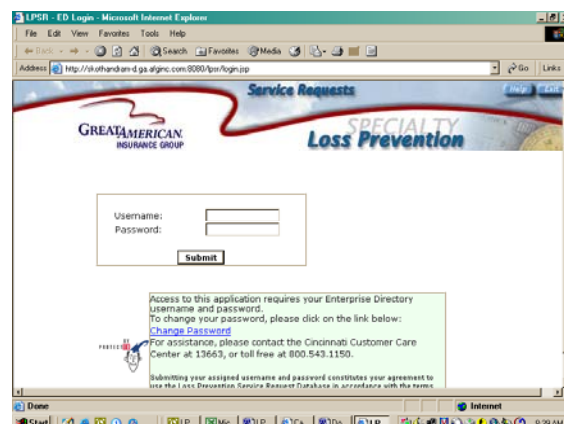
- ❑ Logon to the application
- ❑ Logoff the application
- ❑ Navigate in the application
- ❑ Request help with the application

LESSON 1 — LOGIN

1. Access the Loss Prevention Service Request (LPSR) application by going to the following site: <http://lp.gaic.com>

Note: A user must have an Enterprise Directory Username and Password to access the application.

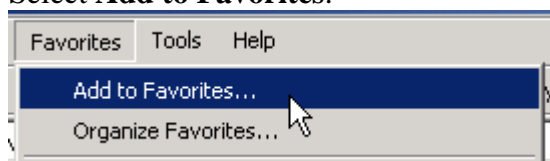
2. Type in Username and Password.
3. Click **Submit**.



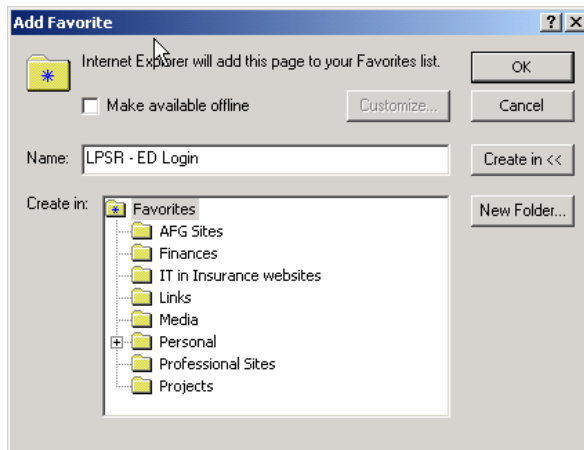
Create a Favorite

To quickly access the LPSR application, you can create a Favorite in Internet Explorer.

1. Once you are at the LPSR Login screen, click **Favorites** from the Internet Explorer menu.
2. Select **Add to Favorites**.



The Add Favorite window opens.

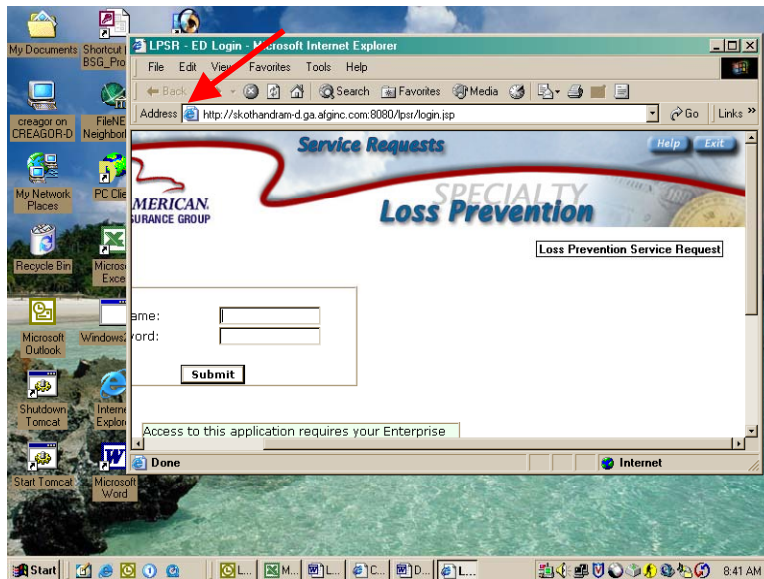



3. Click **OK**. The website can now be accessed from the Favorites menu.

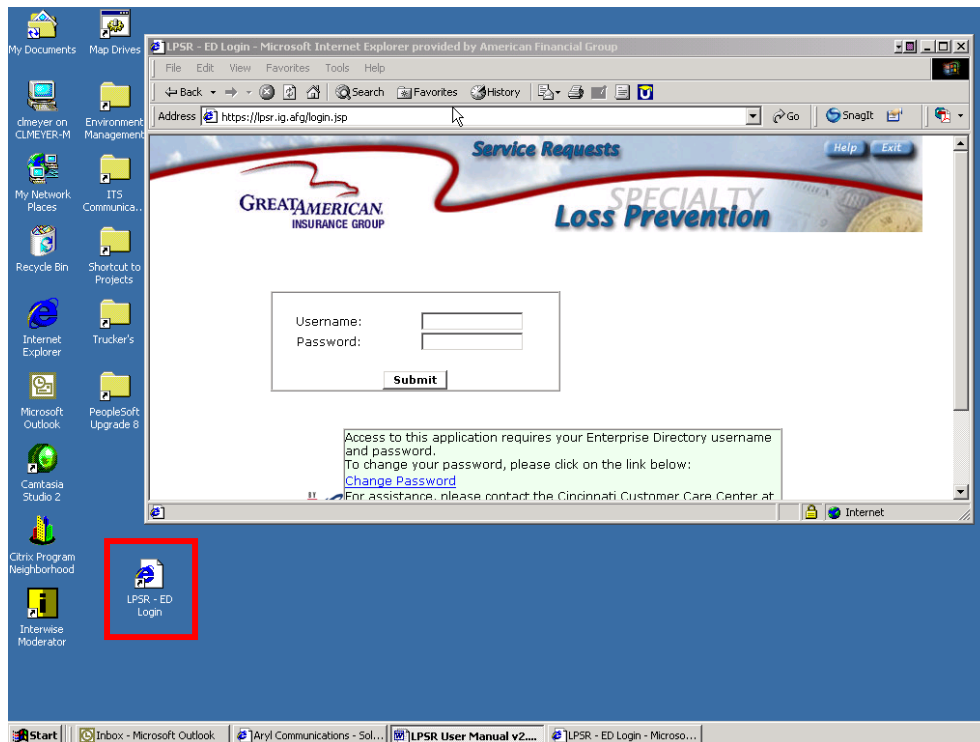
Create a Shortcut to the Desktop

You can access the website by placing a shortcut on your Desktop.

1. Once you are at the LPSR Login screen, minimize the window, so you can see the Windows Desktop.



2. Click the  icon in the Address field and drag it to the Desktop.
3. Release the mouse, and the shortcut icon appears on the Desktop. You can now access the website by double-clicking on the icon.



LESSON 2 — LOGOUT

1. Click the **X** in the top, right hand corner of the window or click on the **Exit** button to close out the session.



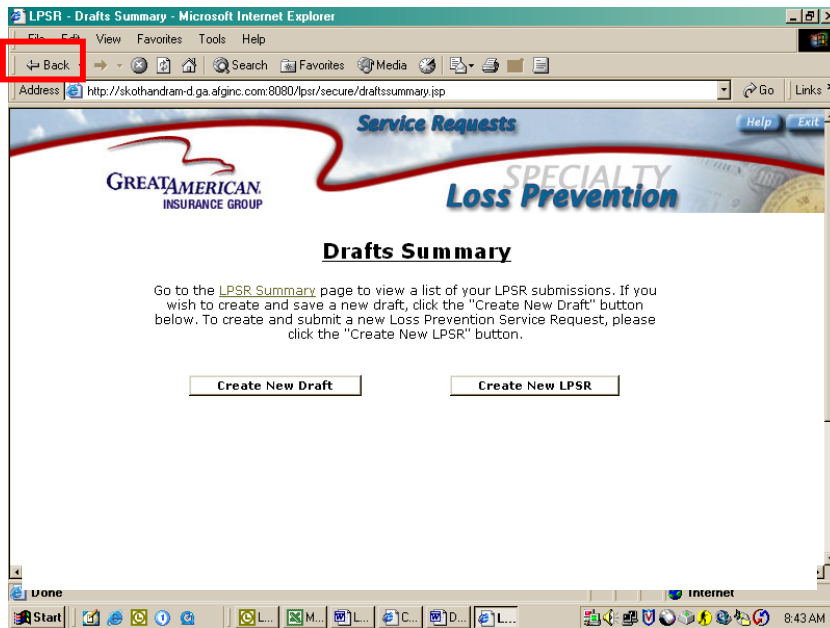
Note: If a user session is inactive for 60 minutes, the session will automatically terminate and any unsaved information will be lost.

Note: Any information not saved prior to exiting will be lost.

LESSON 3 — NAVIGATE IN LPSR

Upon successful login, the Draft Summary page displays. If a user has not saved any drafts previously, the following options will be available:

- Create New Draft
- Create New LPSR



Notes: Do not use the **Back** button to return to previous pages. This action will cause errors and records may be lost or saved inaccurately.

LESSON 4 — REQUEST HELP

To report problems with the application, or to suggest enhancements, please contact Nancy Combs at 513-412-4631 or ncombs@gaic.com.

MODULE 2 — CREATING A NEW DRAFT

After this module, you will be able to:

- ❑ Create a new draft
- ❑ Edit a draft

LESSON 1 — CREATE A NEW DRAFT

1. To create a new draft, select **Create New Draft** on the Draft Summary Page.



The Main Form – New Draft form displays.

Note: Required fields are noted with a {D} to the left of the field name. Insured Name is the only required field on Drafts.

Main Form - New Draft

If you do not see the type of LP service available that you wish to order, please contact Nancy Combs (ncombs@gaic.com).

* Required field for LPSR Submissions; (U) Required field for Drafts; () Required format

* Date ordered: <input type="text"/> (mm/dd/yy) or (mm-dd-yy)	* Date needed by: <input type="text"/> (mm/dd/yy) or (mm-dd-yy)	* Survey Type: <input type="text" value="CHOOSE"/>
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<p>Customer Information</p> <p>* Insured {D} Name: <input type="text"/></p> <p>* Policy Number: <input type="text"/> (XXXXXXXXXX)</p> <p>* Policy effective date: <input type="text"/> (mm/dd/yy) or (mm-dd-yy)</p> <p>* Nature of Business: <input type="text"/></p> <p>* SIC Code: <input type="text"/> 0000 (4 digits)</p> <p>* Premium: <input type="text"/> (currency/no cents)</p>	<p>Customer Location & Contact Information</p> <p>* Customer Contact Name: <input type="text"/> (First) <input type="text"/> (Last)</p> <p>* Phone Number: <input type="text"/> 000-000-0000</p> <p>* Street Address: <input type="text"/></p> <p>* City: <input type="text"/></p> <p>* State: <input type="text"/></p> <p>* Zip: <input type="text"/></p> <p>* Survey Location: <input type="text" value="same as above"/></p>
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Note: Coverage is not a required field for drafts. Selecting a coverage will prompt the application to provide the corresponding coverage form for the user to make additional entries.

- To save the draft or open the selected coverage form, click **Save Draft**. To cancel the draft, click **Cancel**. None of the entries that were made will be saved.

The screenshot shows a web form titled "Request Type". It has two radio button options: "On Site Survey/Consultation (Level I)" and "Phone Survey". Below these is a text prompt: "*** DESCRIBE UNDER 'SPECIAL INSTRUCTIONS' THE OPERATIONS NEEDING THE ASSESSMENT ***". There is an "Attachments" section with a dropdown menu showing "Application", "Declaration Sheet", "Loss Data", and "Vehicle Schedule". To the right is a "Fee Company" section with a dropdown menu and fields for "Name:" and "Email:". Below this is a "Special Instructions" text area. At the bottom, there is a section titled "*Coverages for which Survey is requested" with four radio button options: "General", "Human Services", "Inland Marine", and "Ocean Marine". At the very bottom are "Save Draft" and "Cancel" buttons.

If a coverage was selected, the corresponding coverage form appears. There are no required fields in the coverage forms.

The screenshot shows a web form titled "Human Services Coverage - New Draft". It features the "GREAT AMERICAN INSURANCE GROUP" logo and a "Service Requests" header. The form is divided into four main sections: "Casualty", "Property", "All Risk", and "Crime". Each section contains a list of checkboxes for different types of coverage. For example, under "Casualty", there are checkboxes for "Gen. Liab.", "Prod. Liab.", "Sec. Work Prof.", "Health Care/Nurse Prof.", "Auto", "Hired & Non-Owned Auto", and "Spec. Events". Under "Property", there are checkboxes for "Building", "Contents", "Bus. Int.", "Sprink. Leak", "Other", and "ITV Rpt. Req.". Under "All Risk", there are checkboxes for "Quake", "Water Dam.", "Burg. or Theft", "Collapse", "Transportation", "Flood", and "Other". Under "Crime", there are checkboxes for "Hon & Sec", "Employee Dishonesty", and "Computer Fraud". Each checkbox is followed by an "Amount" field. At the bottom left is a "Done" button and at the bottom right is an "Internet" button.

- To save the entries made in the coverage form and generate the draft, click **Save Draft** at the bottom of the form. To cancel the draft, click **Cancel**. None of the entries made in the main form or the coverage form will be saved.

A status window corresponding to the action requested by the user displays. To return to the Draft Summary page, click the **Draft Summary Page** link.

The screenshot shows a window titled 'Service Requests' with a 'Help' button and an 'Exit' button. The Great American Insurance Group logo is on the left. The main heading is 'SPECIALTY Loss Prevention'. Below this, it says 'LPSR Status - Successful'. A message states: 'The New Draft information with the Human Services Coverage was successfully submitted to the database. Do not hit the BACK button, but please return to the Drafts Summary Page to initiate another action.' The phrase 'Drafts Summary Page' is circled in red.

Note: Information saved in draft form will not be forwarded for assigning until the user selects it to be generated as an LPSR. There is no limitation to the number of drafts that can be saved.

LESSON 2 — EDIT A DRAFT

Once a draft has been created, it will appear under Saved Drafts on the Draft Summary page. From here, the draft can be edited, copied, deleted, or used to generate an LPSR.

1. To select a draft, click the **Select** radio button to the left of the Insured Name.
2. After selecting the draft, click the button corresponding to the action desired.

The screenshot shows the 'Saved Drafts' section with two buttons at the top: 'Create New Draft' and 'Create New LPSR'. Below them is the heading 'Saved Drafts' and a message: 'Below is a list of drafts that you have saved. If you wish to work on any of these drafts, please select one by clicking the box adjacent to it and click on the appropriate Draft Action button.' A table follows with columns: INSURED NAME, STREET ADDRESS, CITY, STATE, ZIP, and COVERAGE. A red arrow points to the radio button next to the first row. Below the table is the 'Draft Action' section with a message: 'Please ensure that you have selected a draft to work with, from the list above, before clicking one of the buttons below.' Four buttons are shown: 'Generate LPSR', 'Edit Draft', 'Copy Draft', and 'Delete Draft'. The 'Edit Draft' button is highlighted with a red box.

	INSURED NAME	STREET ADDRESS	CITY	STATE	ZIP	COVERAGE
<input type="radio"/>	1/2 Street Inn	580 Great American Way	Highlands	SC	33613	General
<input type="radio"/>	1/2 Street's Inn	123 Main Street	Highland	KY	33613	Human Services
<input type="radio"/>	Insured Name the 3rdth	Street Address	City	OH	45201	
<input type="radio"/>	Racing Team	!Main Street	Rockingham	NC	30303	Inland Marine
<input type="radio"/>	Regulatory Services	M1212 Main Street	Highlands	SC	28741	Inland Marine
<input type="radio"/>	Tyke's Racing Team	Main Street	Rockingham	NC	30303	Inland Marine

Actions

- **Edit Draft** – This action will open the draft and allow edits to any of the fields.

- **Copy Draft** – This action will create a duplicate of the selected draft. The duplicate draft will appear in the Saved Draft list.
- **Delete Draft** – This action will delete the selected draft and remove it from the Saved Draft list.
- **Generate LSPR** – This action will open the draft as an LSPR and require all the fields to be completed and submitted. The selected draft remains in the Saved Draft list until the user deletes it.

MODULE 3 — GENERATING A LPSR

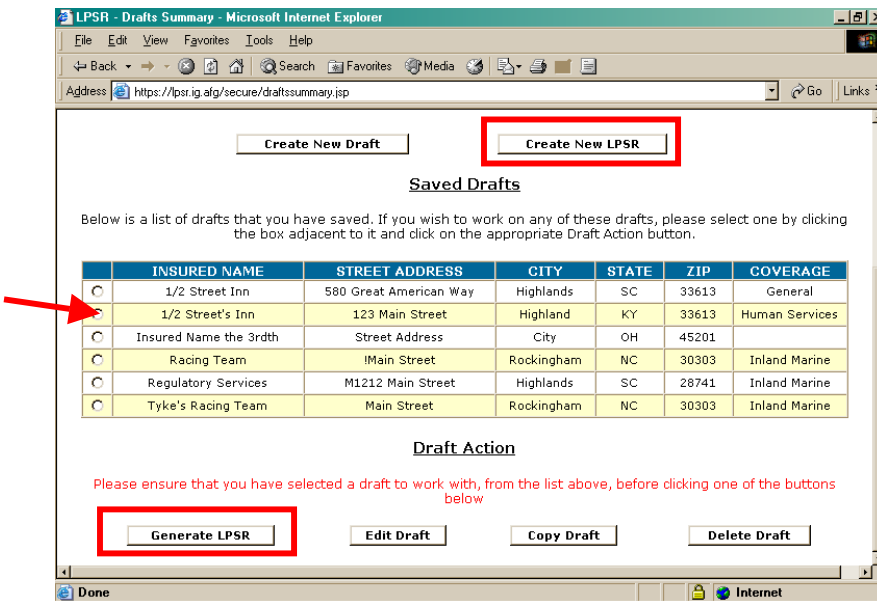
After this module, you will be able to:

- ❑ Generate an LPSR
- ❑ View an LPSR

LESSON 1 — GENERATE A LPSR

An LPSR is generated from the Drafts Summary page.

1. A LPSR can be generated by selecting a draft and clicking the **Generate LPSR** button, or by opening a blank LPSR form by clicking the **Create New LPSR** button.



Note: A LSPR must be completed in its entirety to be submitted. Any information keyed into the LSPR when a session is terminated (i.e., the user closes the application or the browser session times out) will be lost. A partially completed LSPR cannot be saved as a draft.

2. To generate a LPSR, all required fields must be entered. Required fields are indicated by an “*” to the left of the field name. The formatting required for an entry is displayed to the right of the entry field. If entering a LPSR for a prospect, choose **Survey Type, Prospect** and type the word “Prospect” in the **Policy Number** field.

Service Requests Help Exit

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Main Form - New LPSR

If you do not see the type of LP service available that you wish to order, please contact Nancy Combs (ncombs@galc.com).

* Required Field for LPSR Submissions: (D) Required Field for Drafts: () Required Format

* Date ordered: (mm/dd/yy) or (mm-dd-yy) * Date needed by: (mm/dd/yy) or (mm-dd-yy) * Survey Type: Prospect

Customer Information

* Insured (D) Name: []

* Policy Number: Prospect (XXX#####)

* Policy effective date: (mm/dd/yy) or (mm-dd-yy)

* Nature of Business: []

* SIC Code: 0000 (4 digits)

* Premium: (currency/no cents)

Customer Location & Contact Information

* Customer Contact Name: [] (Last)

* Phone Number: 000-000-0000

* Street Address: []

* City: []

* State: []

* Zip: []

* Survey Location: same as above

Note: When selecting a profit center, the profit center can be typed into the entry field or selected from the drop-down menu. Choosing from the drop-down menu will populate the entry field with the selected profit center number. Only the entry contained in the entry field will be used for processing the LPSR.

Customer Information

* Insured (D) Name: Jones the Florist

* Policy Number: Prospect (XXX#####)

* Policy effective date: 05-24-04 (mm/dd/yy) or (mm-dd-yy)

* Nature of Business: Retail Florist

* SIC Code: 0000 (4 digits)

* Premium: 1000.00 (currency/no cents)

Customer Location & Contact Information

* Customer Contact Name: Jane Jones (First Last)

* Phone Number: 000-000-0000 000-000-0000

* Street Address: 123 Main

* City: Sacramento

* State: CA

* Zip: 00000

* Survey Location: same as above

Agency Information

* Agency/Broker Name: Smith Insurance Agency

* Phone Number: 000-000-0000 000-000-0000

* Agency Contact Name: Joe Smith (First Last)

Requestor Information

* Underwriter: Christine Reager (First Last)

* Phone Number: 000-000-0000 000-000-0000

* Profit Center: 0633 [CHOOSE]

Requestor Office Location

* Office Name: []

* City: []

- To select multiple attachments, click on the desired attachments while holding down the **Ctrl** key on the keyboard. Selections will be highlighted.

ATTENTION: You cannot send attachments within the new LPSR. You must email the attachment to Nancy Combs (ncombs@gaic.com) when you submit the LPSR. She will forward it to the representative.

4. To select multiple attachment, click on the desired attachments while holding down the **Ctrl** key on the keyboard. Selections will be highlighted.

To designate a Fee Company, select the name of the Fee Company from the Fee Company drop down box. If the Fee Company is not listed, select Other from the drop down and then provide the Fee Company Name and Email in the Name and Email fields.

The screenshot displays the LPSR form interface. At the top, the 'Request Type' section includes radio buttons for 'On Site Survey/Consultation (Level 1)' and 'Phone Survey', with a prompt to describe operations under special instructions. Below this, the 'Attachments' section features a dropdown menu with options: 'CHOOSE', 'Application', 'Declaration Sheet', 'Loss Data', and 'Vehicle Schedule'. A red box highlights this dropdown, and a note below it says '(Hold the CTRL key for multiple selections)'. To the right, the 'Fee Company' section has a dropdown menu with 'CHOOSE' selected, and fields for 'Name' and 'Email'. Below these is the 'Special Instructions' section with a text area. At the bottom, the '*Coverages for which Survey is requested' section lists four options with radio buttons: 'General', 'Human Services', 'Inland Marine', and 'Ocean Marine'. A red arrow points to the 'Save Draft' button, which is next to a 'Cancel' button.

5. After completing the entries on the main form, click on **Continue LPSR**. The coverage form corresponding to the coverage selected on the main form opens. This form does not contain any required fields.

General Coverage - New LPSR

* Required Field () Required Format

Casualty	Property
<input type="checkbox"/> Work Comp	<input type="checkbox"/> Building <input type="text"/>
<input type="checkbox"/> Gen Liab	<input type="checkbox"/> Contents <input type="text"/>
<input type="checkbox"/> Prod Liab	<input type="checkbox"/> Bus. Int. <input type="text"/>
<input type="checkbox"/> Auto Fleet	<input type="checkbox"/> Sprink. Leak <input type="text"/>
<input type="checkbox"/> Auto Phys Dam	<input type="checkbox"/> Other <input type="text"/>
<input type="checkbox"/> Gar Liab	<input type="checkbox"/> ITV Rpt. Req. <input type="text"/>
<input type="checkbox"/> Garagekeepers	
<input type="checkbox"/> Other <input type="text"/>	

All Risk	Crime
<input type="checkbox"/> DIC Only	<input type="checkbox"/> Open Stock <input type="text"/>
<input type="checkbox"/> Water Dam.	<input type="checkbox"/> Inside Rob. <input type="text"/>
<input type="checkbox"/> Burg. or Theft	<input type="checkbox"/> Outside Rob. <input type="text"/>
<input type="checkbox"/> Collapse	

- After completing the entries on the coverage form, click **Submit LPSR** at the bottom of the form to submit the LPSR. Once submitted, the LPSR will no longer be accessible to the user for editing. To make changes to a submitted request, contact Nancy Combs at 513-412-4631 or ncombs@gaic.com.

Submit LPSR **Cancel**

Once the submission has been successfully submitted, the LPSR Status – Successful window displays.

LPSR Status - Successful

The LPSR information with the General Coverage was successfully submitted to the database. Do not hit the BACK button, but please return to the Drafts Summary page to initiate another action. If you would like to print the LPSR information you just submitted, please click [Print View](#) to preview your submission and print.

LESSON 2 — VIEW A LPSR

1. To view the submitted LPSR, click the **Print View** link. The LPSR submission displays and is available for printing.

Service Requests			
GREAT AMERICAN INSURANCE GROUP		SPECIALTY Loss Prevention	
Name:	Christine Reagor	Date Ordered:	3/24/04
Email Address:	CReagor@gaic.com	Date Needed By:	3/24/04
		Survey Type:	Prospect
Customer Information and Customer Contact Information			
Insured Name:	Jones the Florist	Customer Contact Name:	Jane Jones
Policy Number:	Prospect	Phone Number:	000-000-0000
Policy Effective Date:	5/24/04	Street Address:	123 Main
Nature of Business:	Retail Florist	City:	Sacramento
SIC Code:	0000	State:	CA
Premium:	1000	Zip:	00000
Survey Location:	same as above		
Agency Information			
Agency/Broker Name:	Smith Insurance Agency	Agency Contact Name:	Joe Smith
Agency Phone Number:	000-000-0000		
Requestor Information and Office Location			
Underwriter Name:	Christine Reagor	Profit Center:	0633C269
Requestor Phone Number:	000-000-0000	Requestor Office Name:	;aljdkf
Street Address:	a;ldkj	City:	al;dkjf
State:	ca	Zip:	00000
Request Type			
Request Type:	On Site Survey		
Attachments		Report Format	
Attachments:	Declaration Sheet, Loss Data, Vehicle Schedule	Report Format:	Declaration Sheet, Loss Data, Vehicle Schedule
		Report Forms:	Farm Residential Insurance to Value, Flammable Liquids Evaluation
Special Instructions			

2. To close this window, click the **X** in the top right corner of the window.
3. On the LPSR Status - Successful page, click the **Drafts Summary Page** link to return to the Drafts Summary Page.

Service Requests	
GREAT AMERICAN INSURANCE GROUP	
SPECIALTY Loss Prevention	
LPSR Status - Successful	
<p>The LPSR information with the General Coverage was successfully submitted to the database. Do not hit the BACK button, but please return to the <u>Drafts Summary Page</u> to initiate another action. If you would like to print the LPSR information you just submitted, please click <u>Print View</u> to preview your submission and print.</p>	

LESSON 3 — VIEW A PREVIOUSLY SUBMITTED LPSR

LPSR's submitted within the last six months, are available for viewing.

1. To view a previously submitted LPSR, click the **LPSR Summary** link from the Draft Summary page.

Service Requests [Help](#) [Exit](#)

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Drafts Summary

Go to the **LPSR Summary** page to view a list of your LPSR submissions. If you wish to create and save a new draft, click the "Create New Draft" button below. To create and submit a new Loss Prevention Service Request, please click the "Create New LPSR" button.

[Create New Draft](#) [Create New LPSR](#)

Saved Drafts

Below is a list of drafts that you have saved. If you wish to work on any of these drafts, please select one by clicking the box adjacent to it and click on the appropriate Draft Action button.

	INSURED NAME	STREET ADDRESS	CITY	STATE	ZIP	COVERAGE
<input type="radio"/>	a;lkdfj					Human Services
<input type="radio"/>	Molitor Farm Machinery	123 Main Street	Fayetteville	SC	35030	Human Services
<input type="radio"/>	Racing Team	Main Street	Rockingham	NC	30303	Human Services
<input type="radio"/>	Regulatory Services	M1212 Main Street	Highlands	SC	28741	Inland Marine
<input type="radio"/>	Tyke's Racing Team	Main Street	Rockingham	NC	30303	Ocean Marine

Draft Action

Please ensure that you have selected a draft to work with, from the list above, before clicking one of the buttons below.

[Generate LPSR](#) [Edit Draft](#) [Copy Draft](#) [Delete Draft](#)

2. Select a submission to view by clicking on the Insured Name.

Service Requests [Help](#) [Exit](#)

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LPSR Summary

Go to the [Drafts Summary](#) page to work with Drafts or to create and submit LPSRs.

Submitted LPSRs

Below is a list of LPSRs that you have submitted in the past 6 months. Click on one to view or print the information that you provided. Be advised that you cannot edit data pertaining to a LPSR that you submitted. Please contact Nancy Combs if you have any questions or concerns about your submission.

INSURED NAME	DATE ASSIGNED	STREET ADDRESS	CITY	STATE	ZIP	COVERAGE
CORE FORM DEVELOPMENT FOR WC	1/15/04	NA	NA	NA	00000	Migration
GS LEVINE PRESENTATION	1/15/04	NA	NA	NA	00000	Migration
Jones the Florist	3/24/04	123 Main Street	Sacramento	CA	00000	General
MEETING WITH SHS	1/9/04	NA	NA	NA	00000	Migration
MEETING WITH SHS	1/9/04	NA	NA	NA	00000	Migration
Molitor Farm Machinery	3/21/04	123 Main Street	Fayetteville	SC	35030	General
OCEAN MARINE PRESENTATION	1/1/04	NA	NA	NA	00000	Migration
OCEAN MARINE PRESENTATION	1/1/04	NA	NA	NA	00000	Migration
Racing Team - General	11/1/04	Main Street	Rockingham	NC	30303	General
Racing Team - HS	11/1/04	Main Street	Rockingham	NC	30303	Human Services
Racing Team - HS	11/1/04	Main Street	Rockingham	NC	30303	Human Services
Racing Team - HS	11/1/04	Main Street	Rockingham	NC	30303	Human Services
Racing Team - HS	11/1/04	Main Street	Rockingham	NC	30303	Human Services
Racing Team - HS	11/1/04	Main Street	Rockingham	NC	30303	Human Services
Racing Team - HS	11/1/04	Main Street	Rockingham	NC	30303	Human Services

3. The LPSR submission displays and is available for printing.

Service Requests			
Name: Christine Reagor		Date Ordered: 3/24/04	
Email Address: CReagor@gaic.com		Date Needed By: 3/24/04	
		Survey Type: Prospect	
Customer Information and Customer Contact Information			
Insured Name: Jones the Florist		Customer Contact Name: Jane Jones	
Policy Number: Prospect		Phone Number: 000-000-0000	
Policy Effective Date: 5/24/04		Street Address: 123 Main	
Nature of Business: Retail Florist		City: Sacramento	
SIC Code: 0000		State: CA	
Premium: 1000		Zip: 00000	
Survey Location: same as above			
Agency Information			
Agency/Broker Name: Smith Insurance Agency		Agency Contact Name: Joe Smith	
Agency Phone Number: 000-000-0000			
Requestor Information and Office Location			
Underwriter Name: Christine Reagor		Profit Center: 0633C269	
Requestor Phone Number: 000-000-0000		Requestor Office Name: ;aljdkjf	
Street Address: a;ldkj		City: al;dkjf	
State: ca		Zip: 00000	
Request Type			
Request Type: On Site Survey			
Attachments		Report Format	
Attachments: Declaration Sheet, Loss Data, Vehicle Schedule		Report Format: Declaration Sheet, Loss Data, Vehicle Schedule	
		Report Forms: Farm Residential Insurance to Value, Flammable Liquids Evaluation	
Special Instructions			

4. To close this window, click the **X** in the top right corner of the window to return to the Drafts Summary page.